

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DAVE GILES FOR CONGRESS

ADDRESS (number and street)

3667 EAST MEGAN STREET

Check if different
than previously
reported. (ACC)

GILBERT

AZ

85295

2. FEC IDENTIFICATION NUMBER ▼

C

C00572602

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

AZ

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dale Robert Giles

Signature of Treasurer

Dale Robert Giles

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

DAVE GILES FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	4782.21	4782.21
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4782.21	4782.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26211.61	26211.61
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	26211.61	26211.61
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4570.60	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	26000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 25

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DAVE GILES FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

4782.21

4782.21

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

4782.21

4782.21

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

4782.21

4782.21

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

26000.00

26000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

26000.00

26000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

30782.21

30782.21

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 25

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26211.61	26211.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	26211.61	26211.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	30782.21
25. SUBTOTAL (add Line 23 and Line 24).....	30782.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26211.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4570.60

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

A.

Mailing Address 3667 EAST MEGAN STREET

City

GILBERT

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.

C H6AZ09010

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

12720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period

220.00

In-kind - USPS Setup

Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

B.

Mailing Address 3667 EAST MEGAN STREET

City

GILBERT

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.

C H6AZ09010

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

12730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period

10.00

Dave test \$10 with new system

Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

C.

Mailing Address 3667 EAST MEGAN STREET

City

GILBERT

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.

C H6AZ09010

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20239.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

9.00

SUBTOTAL of Receipts This Page (optional).....

239.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES**A.**

Mailing Address 3667 EAST MEGAN STREET

City

GILBERT

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.**C** H6AZ09010

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period

166.00

In-kind - June 12th Event

Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES**B.**

Mailing Address 3667 EAST MEGAN STREET

City

GILBERT

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.**C** H6AZ09010

Name of Employer

Retired

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20451.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period

46.00

In-kind - Hall Rental 10% of all donations

Full Name (Last, First, Middle Initial)

Victor Robert Giles**C.**

Mailing Address 3667 East Megan Street

City

Gilbert

State

AZ

Zip Code

85295

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

2700.00

Dad's Donation

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2912.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

James Laird

Mailing Address 2847 East Caballero Street

City

Mesa

State

AZ

Zip Code

85213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period

250.00

LWU Class

Full Name (Last, First, Middle Initial)

Susan Laird

Mailing Address 2847 East Caballero Street

City

Mesa

State

AZ

Zip Code

85213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

250.00

LWU Class

Full Name (Last, First, Middle Initial)

Gloria McDougal

Mailing Address 4533 E Enid Cir

City

Mesa

State

AZ

Zip Code

85206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ron McDougal		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address 4533 E Enid Cir		Transaction ID : SA11AI.4151
City Mesa	State AZ	Zip Code 85206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

Full Name (Last, First, Middle Initial) B. Alex Meluskey		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address 23233 N Pima Rd Suite 133 - 175		Transaction ID : SA11AI.4153
City Scottsdale	State AZ	Zip Code 85255
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 2211 North First Street		Transaction ID : SA11AI.4113
City San Jose	State CA	Zip Code 95131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.21
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.21	\$50-Zak&AmandaWolfe/\$10DaveGiles/\$10BrianBrooks - fee

SUBTOTAL of Receipts This Page (optional)	162.21
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Justin Pierce			Date of Receipt M M / D D / Y Y Y Y Y 06 / 12 / 2015	
Mailing Address 2621 E Odessa Cir			Transaction ID : SA11AI.4137	
City	State	Zip Code		
Mesa	AZ	85213		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 40.00	
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 40.00		
B. Full Name (Last, First, Middle Initial) Stacey Lynn Sanguigni			Date of Receipt M M / D D / Y Y Y Y Y 06 / 23 / 2015	
Mailing Address 2108 S Compton			Transaction ID : SA11AI.4156	
City	State	Zip Code		
Mesa	AZ	85209		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 9.00	
Name of Employer		Occupation		
		Banker	Test	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 9.00		
C. Full Name (Last, First, Middle Initial) Ida Scherer			Date of Receipt M M / D D / Y Y Y Y Y 06 / 12 / 2015	
Mailing Address 4744 E. Emerald Av.			Transaction ID : SA11AI.4140	
City	State	Zip Code		
Mesa	AZ	85206		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 50.00	
Name of Employer		Occupation		
Retired		Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
SUBTOTAL of Receipts This Page (optional).....			99.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Lou Scherer			Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2015	
Mailing Address 4744 E. Emerald Av.			Transaction ID : SA11AI.4141	
City Mesa	State AZ	Zip Code 85206	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00		
B. Full Name (Last, First, Middle Initial) Bill Sorenson			Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2015	
Mailing Address 7903 E Plata Ave			Transaction ID : SA11AI.4143	
City Mesa	State AZ	Zip Code 85212	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 20.00		
C. Full Name (Last, First, Middle Initial) Arvid Steffek			Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2015	
Mailing Address 1513 E 7th Dr			Transaction ID : SA11AI.4146	
City Mesa	State AZ	Zip Code 85204	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00		
SUBTOTAL of Receipts This Page (optional).....			_____ 120.00	
TOTAL This Period (last page this line number only).....			_____	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Donna Steffek			Date of Receipt M M / D D / Y Y Y Y Y 06 / 12 / 2015	
Mailing Address 1513 E 7th Dr			Transaction ID : SA11AI.4147	
City	State	Zip Code	Amount of Each Receipt this Period 50.00	
Mesa	AZ	85204		
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00		
B. Full Name (Last, First, Middle Initial) Surag Sheth			Date of Receipt M M / D D / Y Y Y Y Y 04 / 01 / 2015	
Mailing Address 280 Chantecler Dr.			Transaction ID : SA11AI.4177	
City	State	Zip Code	Amount of Each Receipt this Period 400.00	
Fremont	CA	94536	In-kind - Web Ddevelopment	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		
C. Full Name (Last, First, Middle Initial) Surag Sheth			Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2015	
Mailing Address 280 Chantecler Dr.			Transaction ID : SA11AI.4179	
City	State	Zip Code	Amount of Each Receipt this Period 200.00	
Fremont	CA	94536	In-kind - Web Development	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
SUBTOTAL of Receipts This Page (optional).....			650.00	
TOTAL This Period (last page this line number only).....				

Diagram showing the layout of the 15 cells in a 3x5 grid. The cells are labeled 11a through 15. Cell 11a contains an 'X' and is shaded. Cell 12 is shaded. Cell 15 is shaded. Cells 11b, 11c, 11d, 13a, 13b, and 14 are unshaded.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

FEC Schedule A (Form 3) (Revised 02/2009)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 25

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 04 / 01 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4098	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 11000.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C H6AZ09010		Initial Loan	
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 11000.00		
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 04 / 01 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4358	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C H6AZ09010		Brooks Governamnetal	
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12500.00		
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 05 / 20 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4116	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 7500.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20230.00		
SUBTOTAL of Receipts This Page (optional).....		20000.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 25

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>18</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		18		2015	
M M M	/	D D D	/	Y Y Y Y Y Y										
06		18		2015										
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4135												
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>6000.00</td> </tr> </table>											6000.00
										6000.00				
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010											
C	H6AZ09010													
Name of Employer Retired	Occupation Consultant													
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>26451.00</td> </tr> </table>													26451.00
										26451.00				
B. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y						
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Mailing Address														
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td></td> </tr> </table>		C												
C														
Name of Employer	Occupation													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>													
C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y						
M M M	/	D D D	/	Y Y Y Y Y Y										
Mailing Address														
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td></td> </tr> </table>		C												
C														
Name of Employer	Occupation													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>													
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>6000.00</td> </tr> </table>												6000.00
										6000.00				
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> <td>26000.00</td> </tr> </table>												26000.00
										26000.00				

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARIZONA NEWS SERVI 866-8028214 AZ

Mailing Address 1835 W. Adams Street

City	State	Zip Code
Phoenix,	AZ	85007

Purpose of Disbursement
PAYPAL *TEMPERW 402-935-7733 CA

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.4158

B. Brooks Governmental

Mailing Address 6717 Richardson Road

City	State	Zip Code
Victor	NY	14564

Purpose of Disbursement
Fundraising Consultant - Brian Brooks

003

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4359

C. DAVID VICTOR GILES

Mailing Address 3667 EAST MEGAN STREET

City	State	Zip Code
GILBERT	AZ	85295

Purpose of Disbursement
In-kind - USPS Setup

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.4185

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1760.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAVID VICTOR GILES

Mailing Address 3667 EAST MEGAN STREET

City	State	Zip Code
GILBERT	AZ	85295

Purpose of Disbursement
In-kind - June 12th Event

007

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

166.00

Transaction ID : SB17.4171

B. DAVID VICTOR GILES

Mailing Address 3667 EAST MEGAN STREET

City	State	Zip Code
GILBERT	AZ	85295

Purpose of Disbursement
In-kind - Hall Rental 10% of all donations

003

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

46.00

Transaction ID : SB17.4187

C. PAYPAL

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
PAYPAL *TEMPERW 402-935-7733 CA

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.4157

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

262.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213

Purpose of Disbursement

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4106

B. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213

Purpose of Disbursement

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2015

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.4119

c. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213

Purpose of Disbursement

003

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

79.42

Transaction ID : SB17.4122

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17579.42

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213

Purpose of Disbursement

006

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
06	18	2015

Amount of Each Disbursement this Period

1564.47

Transaction ID : SB17.4154

B. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213

Purpose of Disbursement

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
06	18	2015

Amount of Each Disbursement this Period

3750.00

Transaction ID : SB17.4155

c. Surag Sheth

Mailing Address 280 Chantecler Dr.

City State Zip Code
Fremont CA 94536Purpose of Disbursement
In-kind - Web Ddevelopment

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
04	01	2015

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.4178

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5714.47

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Surag Sheth

Mailing Address 280 Chantecler Dr.

City	State	Zip Code
Fremont	CA	94536

Purpose of Disbursement
In-kind - Web Development

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4180

B. USPS

Mailing Address Central

City	State	Zip Code
Mesa	AZ	85211

Purpose of Disbursement
P.o. Box prepayment account

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4108

C. VistaPrint

Mailing Address 95 Haden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Business cards

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

Amount of Each Disbursement this Period

28.72

Transaction ID : SB17.4110

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

328.72

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VistaPrint

Mailing Address 95 Haden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Business cards

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2015

Amount of Each Disbursement this Period

3.75

Transaction ID : SB17.4111

B. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD DISCOUNT FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

0.03

Transaction ID : SB17.4128

c. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD INTERCHANGE FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

0.20

Transaction ID : SB17.4129

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148 Setup Fee

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

199.02

Transaction ID : SB17.4130

B. Doug Wolfe

Mailing Address 2045 E. Foothill

City	State	Zip Code
Apache Junction	AZ	85119

Purpose of Disbursement
June 12th event

007

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4167

c. Doug Wolfe

Mailing Address 2045 E. Foothill

City	State	Zip Code
Apache Junction	AZ	85119

Purpose of Disbursement
June 12th event

007

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

Amount of Each Disbursement this Period

64.00

Transaction ID : SB17.4131

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

563.02

26211.61

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 22 OF 25

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4098

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

11000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

11000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 01 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

11000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 OF 25

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4358

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 01 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 25

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4116

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 20 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 25 OF 25

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4135

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

[PERSONAL FUNDS]

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

GILBERT

State

AZ

ZIP Code

85295

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 18 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

6000.00

TOTALS This Period (last page in this line only)..... ►

26000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.